

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721947

FILED
Jan 29, 2007
Secretary of State

Entity Name: CYPRESS CATHEDRAL ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

1801 HAVENDALE BLVD.
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

1801 HAVENDALE BLVD.
WINTER HAVEN, FL 33881

New Mailing Address:

FEI Number: 59-1270963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, DWIGHT W
1801 HAVENDALE BLVD.
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: LANGDON, GLENDA
Address: 240 HILL COURT
City-St-Zip: WINTER HAVEN, FL 33881

Title: VP () Delete
Name: BASSHAM, GENE
Address: 1647 MARKER RD
City-St-Zip: POLK CTY, FL

Title: PD () Delete
Name: EDWARDS, DWIGHT
Address: 1801 HAVENDALE BLVD
City-St-Zip: WINTER HAVEN, FL

Title: D () Delete
Name: LANGDON, DAVID
Address: 240 HILL COURT
City-St-Zip: WINTER HAVEN, FL

Title: D () Delete
Name: METZGAR, DAVID
Address: P.O. BOX 356
City-St-Zip: LAKE HAMILTON, FL 33823

Title: D () Delete
Name: HERSTINE, BRADY
Address: 2000 21ST STREET NW
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DWIGHT W. EDWARDS

PD

01/29/2007

Electronic Signature of Signing Officer or Director

Date